

THE MEDICAL NEWS AND LIBRARY.

VOL. X.

SEPTEMBER, 1852.

No. 117.

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MEDICAL PROGRESS.

New York State Medical Society.—This Society commenced its second semi-annual meeting, in the Hall of the College of Physicians and Surgeons, Crosby Street, June 29. President, Dr. Alonzo Clark, in the chair, and about eighteen members present. In the absence of the Secretary, Dr. Hun, Dr. T. F. Cock was appointed to act *pro tem*. Prof. Jos. M. Smith welcomed the Society to the Halls of the College. Committees to arrange business and to admit honorary members for the session were appointed.

The President read an address, one of the most important suggestions of which was, the construction of a series of blank forms, embracing various important diseases, to be printed and circulated, in order to obtain statistics on a uniform basis.

Dr. Tuthill read an elaborate and valu-

able paper upon vital statistics, which was referred for publication.

Prof. C. A. Lee read a paper upon the moving forces of the circulation, giving a *résumé* of the various theories propounded in explanation. Mrs. Willard's opinions received full consideration.

Dr. Swett read a paper on the Pathology of Bright's Disease, in confirmation of the views on this subject, recently brought forward by Dr. Johnson, of London, that the disease is a fatty degeneration of the kidneys. Dr. Van Arsdale exhibited, under the microscope, a number of specimens, illustrating the appearances presented by this degeneration. The two microscopes used were manufactured by an artist, residing at Brooklyn, of the name of Grunow.

Wednesday, June 30, 9 A. M.

Dr. J. R. Wood, of this city, then gave a history of a remarkable case of rupture of

Published Monthly by BLANCHARD & LEA, Philadelphia, at One Dollar a year, and sent GRATUITOUSLY to all subscribers of the "American Journal of the Medical Sciences," who remit the Annual Subscription, Five Dollars, in advance.

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the bladder successfully treated, in a boy about ten years of age. The little patient was exhibited, much to the satisfaction of the members. Dr. Wood remarked, that of some eighty similar cases, whose histories had been collected, not more than two or three had recovered.

Dr. Thomas Spencer read a very able paper on the "Atomic Theory of the Growth of Vegetables," accompanied with large coloured diagrams, by which he illustrated all the changes that take place in the vegetable organization, which he attributed to the chemico-vital action of six elements, which were prominently displayed by new chemical symbols, viz., two supporters of combustion, chlorine and oxygen; two leading combustibles, carbon and hydrogen; and two combustible metals, sodium and iron. By the instrumentality of iron at the leaf, the carbonic acid for tree growth is made from the food of plants, as the doctor explained; and the strict analogy of *leaf* and *lung* respiration was pointed out in part, although time did not allow his presenting the animal branch of his subject in full, as he had been invited to do, and sustained with uncommon ability. The paper was referred to the Committee on Publication in the State Medical Transactions, published annually by the legislature.

Dr. Parrish, of Philadelphia, then presented copies of the Pennsylvania Medical Transactions, calling attention to one feature of them, the study of epidemics in connection with the geological structure of their different localities, and thanking the Society, also, for the honour of being elected an honorary member.

After the action taken thereon, the President passed the Society over into the hands of the Committee of Arrangements, under whose direction they visited the New York Blind Asylum, the Institution for the Deaf and Dumb, the Reservoirs, the High Bridge, &c.; calling, on their return, at the elegant country seat of Dr. Mott, at Bloomingdale, by whom they were entertained in the most hospitable manner.

In the evening, the Society attended a meeting of the New York Pathological Society, at their rooms, in the Crosby Street College, which was also attended by a large number of physicians, many of them from other sections of the State.

Numerous specimens of interest were

exhibited, and made the subjects of valuable practical remarks.

Thursday, July 1, 9 A. M.

The Society again met, according to adjournment, at the College. The President, Dr. Clark, made a very interesting communication to the Society on the subject of pneumonia, containing some new views as to the nature of the changes which occur in its different stages; after which the Society adjourned for the purpose of visiting the various hospitals and establishments, at the invitation, and under the charge of the governors of the almshouse, on Randall's, Ward's, and at Blackwell's Islands, and at Bellevue.

This excursion afforded the members great satisfaction, and impressed them very favourably with the character and management of our public benevolent institutions.

Friday, July 2.

Dr. Corson read an interesting paper on the "Functional Diseases of the Heart, their Rational and Physical Signs, and Treatment," which was referred to the Committee on Publication.

Dr. Van Buren then read a paper on the operation of tying the subclavian artery, with statistics of the operation, together with a report of a case, in which he operated successfully, the patient being under the influence of chloroform, and with the result of saving the patient's life. Dr. V. B. stated that he had collected 101 cases in which the operation had been performed; 43 deaths out of the whole.

This was a valuable paper, and was also referred to the Publishing Committee.

Dr. Peet, President of the Institution for the Deaf and Dumb, in this city, read an elaborate paper on the statistics, treatment, causes, &c., of deafness and dumbness, containing many interesting results, of which our limits will not allow us to give even a brief abstract. It was regarded as a very valuable contribution to science, and measures were taken to insure for it a circulation commensurate with its merits.

Dr. Spencer gave an outline of some points connected with the paper which he had read, which were rendered brief by the near approach of the hour for visiting the New York Hospital, to which institution the Society then adjourned, where they examined, with much interest and satisfaction,

the improvements in ventilation and warming recently introduced.

The afternoon was chiefly devoted to an exposition, by Dr. Clark, of the statistics of pulmonary consumption. Thanks were then voted to the managers of the different public institutions for their kind invitations, also to Drs. Mott, Cheesman, and Stevens, and to the College of Physicians and Surgeons, for the ample accommodations furnished; when the Society adjourned.

An invitation was extended to the Society to meet the New York Academy of medicine, and to visit the new college edifice of the University of the City of New York, in Fourteenth Street, which were accepted; but, owing to the many other pressing engagements, could not be met.

The meeting was then adjourned, after four days of pleasant and profitable intercourse. Such occasions contribute very much to the promotion of good feeling among distant members of our profession, as well as to mutual information; and we trust that the plan of semi-annual meetings, exclusively devoted to scientific and practical purposes, will be continued.

13th Congressional District of Virginia Medical Society.—A meeting of the physicians of the 13th Congressional District, Virginia, was held at Abingdon on the 22d July last, when a District Society, auxiliary to the State Medical Society, was formed, and the following officers elected:—

President.—Dr. W. P. Floyd, of Wytheville.

1st Vice-President.—Dr. A. R. Preston, of Abingdon.

2d Vice-President.—Dr. E. D. Kernan, of Lebanon.

Recording Secretary.—Dr. Jas. H. Dunn, of Abingdon.

Corresponding Secretary.—Dr. W. F. Barr, of Abingdon.

Treasurer.—Dr. D. Trigg, of Abingdon.

The Code of Medical Ethics of the American Medical Association was adopted for the government of the members of this Society.

The annual meetings are to be held in Abingdon, on the first Tuesday of April.

CLINICS.

Clinical Lectures on the Diseases of the Rectum, delivered at University College

Hospital. By RICHARD QUAIN, Esq., F.R.S.—The first disease of the rectum which I shall notice is that most frequently met with, *hemorrhoids*. This term strictly or etymologically regarded, means a discharge of blood merely. Though at one time used in a more extended sense, it has, by medical writers, and I might say for centuries, been restricted to disease affecting the rectum; and vascular tumours of that part, whether attended with a discharge of blood or not, have been named hemorrhoids.

Certain distinctions are admitted by surgeons: thus, a very old one, according as there is or is not a loss of blood, "blind" or "bleeding"—*hemorrhoides cæcæ vel apertæ* of ancient surgery; and again, according to the position, whether the tumour be in view or concealed within the bowel, "external" and "internal." These distinctions are preserved, and we shall by-and-by see, that like most things which stand the test of time, they are not immaterial, inasmuch as the position of the tumour and the condition indicated by the terms referred to, have their influence in determining the method of treatment. Why this is so, we shall see hereafter. The disease seldom affects the very young; but it is remarkable, that few persons attain to maturity without suffering from it more or less. It is met with equally in both sexes. The degree in which it affects different persons is very various, and it has a tendency to increase if unchecked. But these and other circumstances will best appear by examination of our cases, to which I now proceed. I shall begin with an instance of the earliest form of the disease that requires medical treatment.

Mr. J. R., aged 32, applied to me, expressing an earnest desire that I should do anything necessary to relieve him as speedily as possible from a painful "attack of piles." He had been suffering about twenty-four hours. Upon examination, I found the margin of the anus concealed by large and very dark-coloured growths, the thickness of the finger, completely encircling the orifice of the bowel, and only parted by slight depressions. They had very much the appearance of large leeches gorged with blood. At the inner side of this external dark circular tumour (it might be said in the middle) there appeared a single projecting papilla, which was easily distinguished by its shape and colour from the surrounding mass. It was of a vivid red colour, and about the size

of the end of the little finger. The external larger tumour gave the idea of a very large vein, with thin walls, distended with dark blood. The inner one seemed as if filled with arterial blood. There had been but very little bleeding—no more than a slight trace during the evacuation of the bowels. When questioned, the patient complained of heat and throbbing pain at the end of the bowel, as well as of the feeling of a foreign body there. The sitting posture was stated to be distressing; and he threw himself back on his chair to prevent pressure on the tumour. Such was the history of the local complaint; but this was not the whole of the malady. The tongue was somewhat furred; it was also larger, broader, and thicker, than natural; and, in consequence of this, was tooth-marked, indented, upon its sides. The alvine evacuations were few and scanty; and there was little or no appetite for food. Concurrently with this condition of the alimentary canal, and probably consequent upon it, there was heat of skin with restlessness and a general feeling of discomfort.

The condition thus sketched out, is what was called by the patient, "an attack of piles," and it is usually so named; but, in fact, the state of the rectum in such a case is but part of a more general ailment. The whole intestinal canal is affected. That there is congestion of the canal, we have evidence in the state of the tongue, as well as in the condition of the bloodvessels of the rectum; and to this direct evidence afforded by the parts which are in view must be added, the inference respecting the state of the stomach, and other parts of the intestine, as well as of the liver, to be drawn from the loss of appetite for food, and the deficient and depraved alvine evacuations. The hemorrhoid is particularly referred to by the patient, because this is the most painful portion of the malady and the most obvious. The organization of this part, as of others that may be termed outlets of the body, will explain why so much uneasiness is produced by even a small amount of disease in it. And now as to the treatment of our case:—

The patient was sent to bed, warm fomentations were applied to the chief local malady; food was disallowed, with the exception of some common drink and a little bread. A spoonful of castor-oil was given—to this medicine, it may be mentioned, the patient had for some time been habituated.

After the bowels had acted, citrate of potash with nitre was given, with the view of acting upon the skin and kidneys. In two days our patient was returned to business.

In such a case, the chief part of the cure consists in general and medical management rather than strictly surgical interference. The horizontal position of the body is useful, obviously on account of its effect upon the flow of blood in the veins of the bowel; but, indeed, independently of the actual painfulness of the sitting posture, where there is an irreducible protrusion of the hemorrhoids, the patient is most comfortable when lying down, on account of the general uneasiness and prostration of strength that he feels. To this it must be added, that the warm and equable temperature of bed has its use, all the more, too, if a degree of perspiration should come on. And, while the internal congestion, which is the essence of the disease, is being relieved by the natural emunctories of the body, the ingesta should be in very small quantity, as well as of the least stimulating kind. Precept, however, is scarcely necessary with respect to abstinence; for the appetite is very small, if there be any.

The hemorrhoidal tumour, if it be one that has descended from within the sphincter, ought to be returned, provided the replacement can be effected with gentle continued pressure, and without giving much pain. This is often most easily accomplished by the patient. Should there be much local distress, a few leeches may be applied with advantage, not, however, upon, but in the near neighbourhood of the tumour. Under this management, even a severe attack subsides in two or three days. The hemorrhoidal veins collapse, the tongue assumes in a great degree its natural size and appearance, and the appetite returns.

But now another consideration arises. The patient, Mr. R., was recovered, but he had recovered in somewhat the same way from previous attacks. If left to himself, he would again and again have had to pass over the same course of frequent ailing and occasional suffering, until at length there would have been established a lasting local disease. Our task is not accomplished when the attack which has summoned us to the patient has been subdued. He is not then to be consigned, at least not without admonition, to his old course of life, and his frequent use of drugs. Our duty plainly is,

to seek for the source of his malady, and if possible remove it. This brings us to the causes of his suffering, and of the hemorrhoidal affection.

You will find it stated in books, that enlargement or induration of the liver is a cause of piles; so also, that abdominal tumours, and pregnancy in the female, are severally causes of this complaint. The statement is quite correct. I have had examples of the disease arising from these causes; but in far the greater number of cases the hemorrhoids exist without any appreciable internal organic change. In the case above cited, there was no such cause. For the origin of the local disorder in our patient, we must therefore look elsewhere. I found that Mr. R. had, for a few years, led a very inactive life; that he was in the habit of sitting in his chambers nearly all day, and up to a late hour at night, only relaxing when he went to dine at his club. He ate a full dinner usually, and drank a moderate quantity of beer and wine. Frequently in consequence of a feeling of fulness and throbbing in his head, which often interfered with sleep, Mr. R., of his own accord, resorted to the use of purgatives, and, under eminent advice, he also took during some time various medicines—among others an alkali with hydrocyanic acid. But these means produced no lasting improvement; and it is not probable that any medicine would have been permanently beneficial while the habits of the patient continued unaltered. For, with such a course of life, while blood was formed, and doubtless in abundance, there was but little demand for it, so to say, except towards the brain and the digestive organs. The muscles of the limbs were little used. The skin was inactive. So, likewise, judging from the torpor of the bowels and the character of the evacuations, was the liver. By such circumstances, the congestion of the head and of the alimentary canal may be reasonably accounted for.

But how was relief, and that as permanent as possible, to be afforded in such a case? My answer is, Not by the continued use of drugs, but by attention in detail to the various circumstances which conduce to the maintenance of a healthy state of the system. Thus: while the diet is regulated—made more moderate in quantity, as well as less stimulating—the skin is to be thoroughly cleansed by daily ablution. Active exercise is to be taken for, at least, a couple of hours

each day, afoot or on horseback; and the effect of this, it is to be borne in mind, is all the more salutary if a degree of perspiration accompanies the vigorous exercise of the limbs. By the action of the skin (which is one of the great emunctories of the system) and the increased nutrition of the muscles, the internal congestion, before adverted to, is removed or prevented; and a feeling of elasticity—of health, in short, is substituted for the former feeling of heaviness and discomfort. During four years, the gentleman whose case forms the groundwork of these observations has pursued this plan, taking his exercise on horseback; and during that space of time he has been free from any recurrence of the hemorrhoidal affection, as well as from (with only occasional exceptions easily accounted for) the throbbing of his head and uneasiness down the left arm. It is not always easy to convince people that medicine cannot safely be made a substitute for moderation in diet, pure air, and exercise of the limbs—in short, for all the natural circumstances which experience shows to be necessary for the preservation of health. To the person of sedentary habits, the aperient drug gives relief for the moment, as it not only evacuates the bowels, but also unloads the bloodvessels of the abdomen in a degree, by exciting a watery or serous discharge from them. When absolutely necessary, and for an occasion, the purgative is as salutary as it is an efficient aid in the removal of the attack of illness. In this way, it is really beneficial—not so, however, its continued use. Besides, the fact is not to be overlooked, that the frequent resort to aperient medicine creates a strong desire for the continuance of the practice, owing, it is said by those who experience the effect, to the sense of "ease and lightness" it occasions. So, in time, a habit is created—one, too, as difficult to be got rid of as any other habit. Our patient admitted, that, for several years, he had commonly taken purgative pills with senna draughts or castor-oil once or twice a week; and that, when leaving home, he used to consider medicine of that kind as much a necessary part of his luggage as any portion of his wardrobe.

I have now adverted in general terms to the plan of management, dietetic and medicinal, that it is proper to pursue. In actual practice, all must be stated in detail; and it is best, in most cases, that the instructions for diet and general management should be

written down, as well as those for medicine. Remember that, as much of the illness which is suffered is induced by the common things with which we are all constantly surrounded and influenced, so the relief and prevention of the evil is, in a great measure, to be obtained by the direction and control of these. Common things must be carefully attended to by the practitioner; uncommon things will command attention. Upon this part of the subject I have dwelt at greater length to-day, in order that it should not be necessary to return to it upon another occasion.

We have now had before us a case in which the local treatment was of the simplest kind. There was no operative interference. Had the attack been more severe, the local suffering greater, it would have been useful to apply leeches, as mentioned in a former part of this lecture; or relief may, in similar circumstances, be afforded by puncturing the tumours. This expedient relieves by removing the distension. Again, a degree further of interference becomes necessary, with a slight additional increase or alteration of the local malady. This condition is illustrated by the case of a gentleman to whom I was summoned some time since. Mr. H., the gentleman alluded to, having been engaged very closely in a course of investigation into an important scientific subject, had been very negligent of his health, and, in consequence, became affected with an acute attack of hemorrhoids. The tumour, a round venous-looking mass, became very hard, and was intensely painful. The hemorrhoid was, in fact, strangulated. This state is met with in various extent, and with a very various amount of suffering. It is remedied, not by puncture, but by free incision of the swelling. When the hemorrhoid is divided, a clot of blood is turned out, and much relief follows. The part cicatrizes in the usual way, and the cure of that tumour is complete. If, however, the inflamed hemorrhoid should not be interfered with by the surgeon, it is, nevertheless, closed by the adhesive process, and the swelling subsides on the subsidence of inflammatory action. But the suffering in these circumstances is more protracted, and a degree more of thickening commonly remains afterwards.

We are now to proceed a step further—from the form, that is to say, of hemorrhoidal disease, in which the altered condition of the vessels of the rectum is a part as well as

an indication of a more general malady, and disappears without operative interference on the part of the surgeon, or with but little, to a more advanced form of the complaint, in which the hemorrhoid is become a substantive disease requiring local management, and, for the most part, remaining permanently, with more or less inconvenience to the patient. The vessels here are more than dilated. Their walls are thickened in consequence of the repeated inflammatory attacks to which they are subjected. They become tortuous as well; and there is often added a deposit of fibrinous matter, by which the parts of the twisted vessels are glued together, and an indurated tumour is formed. The process of change last adverted to, occurs most extensively in external piles.

Many persons continue through life to suffer inconvenience from hemorrhoids in this condition; and, if the inconvenience be not considerable, or if their presence be not attended with effects otherwise injurious, as for example with much pain or bleeding, it is best, as regards local management, to resort to palliative means only. Like most other parts that are not in a natural or entirely healthy state, the hemorrhoids are liable to be affected by attacks of general ill health. As the joints of the gouty man, the morbid urethra of another, or the tender eyelids of a third, suffer especially in case of even slight general derangement, so do the thickened hemorrhoidal vessels partake in the general disturbance. It is not that the gouty joint or the hemorrhoid is alone diseased, but that, being previously in an altered state, these parts respectively take on diseased action more abundantly than other ordinarily sound structures. Moreover, as it is the digestive apparatus which suffers most frequently in slight ailments, as from irregularities of diet, for instance, the hemorrhoids, on account of their direct connection with the vascular system of the alimentary canal, are influenced by the general excited or altered action of the part; and they therefore often become a source of inconvenience, being in the intervals of such attacks quiescent. A case known to your professor, Dr. Sharpey, may be briefly mentioned, as apt to our present purpose. A gentleman now advanced in life has been habitually subject, since he was a young man, to bleeding from hemorrhoids. These are not otherwise troublesome, and the hemorrhage has not been considerable in amount. Such circum-

stances are so common as to be almost daily met with ; but there is here one peculiarity worthy of notice, namely, that this gentleman has always been able to predict the occurrence of the hemorrhage. He is enabled to do this from having long observed, that a peculiar feeling of general discomfort and fulness, as well as a change of the colour of a spot at the root of his nose always ushers in the discharge of blood. The spot—a vascular one—at the times adverted to becomes red, i. e., it is perceptibly deepened in colour. Relief from the general uneasiness is obtained when the bleeding takes place ; and at the same time the little index-spot resumes its ordinary appearance. Whether the loss of a small quantity of blood actually occasion the improvement in such circumstances, or the hemorrhage but indicate the alteration in the state of that fluid which probably accompanies the cessation of disease, or whether both these modes of viewing the subject be in part theoretically correct, it is not material to the present purpose that I should stop to inquire. It is enough to say, that there is here another proof that the hemorrhoid is to be regarded as part of a general ailment ; and at the same time the case well illustrates that degree of the hemorrhoidal disease and of hemorrhage which it would be improper to interfere with. But to the evils of interference in unsuitable cases we shall return hereafter.

For the general management of the class of cases alluded to in the foregoing observations, the rules laid down in a former part of the lecture are applicable. An acute attack is conducted to its termination in the same way. When the state of the local malady admits it, active exercise is to be taken, so far as the condition of the patient's strength allows. The same attention to the state and the functions of the skin is required ; so likewise is the same watchfulness respecting the quantity and the quality of the food to be observed. But, even with good management in these respects, habitual sluggishness of the bowels often accompanies the hemorrhoidal disease. The use of aperient medicines then becomes necessary. When resorted to, the aperient medicines ought to be such as unload the bowel with the smallest degree of irritation. Saline aperients are seldom applicable. They have a tendency to increase flatulency, which is often a troublesome accompaniment of constipa-

tion. The medicines characterized as drastic are likewise, for obvious reasons, to be avoided. The electuary of senna, with various additions, has long been in use to relieve the constipation ; and, in a large proportion of cases, it answers the purpose very well. When this medicine proves insufficient—and I have not infrequently found it so—castor-oil may be administered as occasion arises, or the purgative quality of the electuary may be augmented by admixture of other aperients. To such medicines, the enema of tepid water, used daily, will be a useful auxiliary ; or this means, should it prove adequate to the purpose, may take the place of all other remedies. But, at the same time, it is expedient, that no effort should be wanting to attain the end in view, by the management of the diet, and attention to other natural circumstances, rather than by direct action on the canal, either by the use of drugs or of the other expedient adverted to. Such means as the foregoing are, it is to be understood, applicable in cases in which the hemorrhoidal affection is unaccompanied with evidence of congestion of any important organ—the liver, for instance ; where disease of this kind exists, suitable remedies for its removal will of course be used, but they fall within the domain of general medical treatment, and need not be specified in this place.

As regards the local means to be had recourse to : The hemorrhoid, if it has been protruded, must be carefully replaced after each descent : first, however, the swelling is to be sponged with cold water, and it will be advantageous to use also an astringent application in the form of lotion or unguent. An ointment of nutgalls is a very old and popular remedy, and I have known it favourably spoken of by patients. The acetate of lead and watery extract of opium made into an ointment, seem to have a beneficial effect. But, if there be any excoriation of the surface, most medicated applications do harm, by irritating the part. The continued use of the bougie has been recommended, in hemorrhoids of this kind, but I have never resorted to the practice. In conveying to you the opinion I have formed respecting this method of treatment, I must first observe, that the fact of the condition of the patient being improved during the time that the bougie is being passed, cannot be accepted as proving that the amendment is owing to the instrument, for amendment takes place

in similar cases without this expedient; and I do not see how we are to expect temporary pressure to be beneficial as regards the varicose condition of the hemorrhoidal veins, when even continuous pressure upon the veins of the foot or leg in a varicose state is known to serve for no more than a support while it remains applied, not in any case for a cure. I have had under my care lately a young lady who had during the nine previous years suffered often and much from hemorrhoids. When I saw her she was under thirty years of age, and she had long been in the habit of using a metallic instrument three inches in length, calculated to make pressure upon the swelling, and as effective pressure as could be made with a bougie. There was no prolapsion in this case, except of the kind which commonly attends internal hemorrhoids; and to this extent it occurred only during the acute attacks, which were not frequent. The use of the apparatus had not been attended with any beneficial effect. To these objections it must be added, that the continued passage of any instrument, unless where an absolute necessity for its use exists, is to be deprecated; for the patient's mind becomes thereby fixed upon the malady as well as upon the idea of the mechanical treatment, and an additional difficulty in the management of the case is to be overcome.

My object in this lecture has been, to show that hemorrhoids are to be regarded, not merely as a local disease, but as part of a more general ailment, and to illustrate the form and degree of the complaint in which a surgical operation for the removal of the hemorrhoid is not required and not justifiable. The next lecture will exemplify the circumstances under which an operation becomes necessary.—*Medical Times and Gazette*, Jan. 10, 1852.

MEDICAL NEWS.

DOMESTIC INTELLIGENCE.

Deaths from Chloroform.—A young man, eighteen years old, a German, at work in Carlton's cooper shop, on Tuttle's Wharf, East Boston, had one of his fingers caught in the machinery, and badly jammed. He called upon Dr. Folts to dress it, who administered chloroform. While engaged in the operation, an unusual paleness was observed in the face of the young man, and

the sponge was taken away. Efforts were made in vain to restore him to consciousness, but he soon ceased to live.

Saturday evening, Mrs. Davis, the wife of Mr. John Davis, of Holden, came to her death by the use of chloroform, administered for the purpose of having a tooth extracted. Being at the house of her physician, she wished him to extract a tooth which troubled her, requesting him at the same time to administer chloroform, which he declined doing. She then returned to her home without having the tooth extracted, but in the course of the evening she sent for the physician, and again very urgently repeated her request, to which consent was this time given, her husband also joining her in the request. The chloroform was held to her nose, and on inhaling the first draught she sank back and instantly expired, without even again breathing. She had taken chloroform on several previous occasions without harm.

Pennsylvania Hospital.—The Board of Managers of this Institution determined, at a meeting early in this year, that it was expedient, in consequence of the increased number of patients, to appoint an additional surgeon, and at their meeting in May last Dr. JOHN NEILL was elected to that office.

Wills' Hospital.—Dr. EDWARD HARTSHORNE has been elected one of the Surgeons to this hospital in place of Dr. John Neill, who had resigned in consequence of his election as surgeon to the Pennsylvania Hospital. Another vacancy has been created by the recent decease of Dr. Isaac Parrish, which is not yet filled.

University of Pennsylvania.—The chair of chemistry in this school rendered vacant by the death of the late Dr. Jas. B. Rogers, has been filled by the election of his brother, Dr. ROBERT E. ROGERS, of the University of Virginia. The appointment has given satisfaction to the friends of the school.

University of Louisville.—Dr. DRAKE has resigned the chair of *Theory and Practice of Medicine*, and Dr. COBB that of *Anatomy* in this school, and it is announced in the *Western Journal* for July that their places have been filled by the election of Dr. AUSTIN FLINT to the former, and Dr. PALMER to the latter chair, and that "these gentlemen have accepted."

University of Buffalo.—Dr. PALMER has resigned the chair of *Anatomy* in this school, and his place has been supplied by the election of Prof. E. M. MOORE, for many years a teacher of *Anatomy* and *Surgery* at Woodstock, Vt., and Pittsfield, Mass.

Since the last session the subject of morbid anatomy has been added to the chair of *Physiology*, and will be taught by Prof. Dalton.

Dr. Flint has accepted the appointment in the Louisville school, but will nevertheless give his course in the *University of Buffalo* for the next session, during the last half of the term. The regular term will commence on the 5th of January, 1853, and continue for four months.

"In view of the course pursued by other institutions, with which, from their geographical situation, the school of Buffalo is necessarily brought into competition," it is announced that "the faculty have resolved to adopt, for the next session, a change with respect to fees. The aggregate fees for the tickets of the seven professors will be *fifty dollars*; and, in particular cases, a note, satisfactorily endorsed, upon interest, will be received. The latter new feature in the management of the institution is adopted, for the present collegiate year, for the same reason that the reduction in fees has been made."

Stronger evidence could not be adduced that medical schools have been multiplied to an extent which has created a rivalry injurious to themselves, and which tends to lessen the requirements for the diploma and degrade the standing of the profession.

St. Louis University.—The annual announcement of the Medical Department of the St. Louis University, for the session of 1852—53, is a dignified and manly one, exhibiting a strong contrast to the boastful, puffing advertisements sent out by some other schools. "In making out the catalogue," it is said, "care has been taken that no names shall appear except of such as were actually in attendance. If the faculty were disposed to rest the merits of the school on numbers alone, they could easily have swelled the list far beyond its present size."

Among the requisitions for graduation is the following, to which we would call especial attention, and strenuously urge all the medical colleges to adopt a similar requirement:—

5th. "And that he" [the candidate] "publicly assent to the following promise, prior to the conferring of the degree, viz.:—

"You, A. B., do solemnly promise that you will, to the utmost of your ability, exert your influence for promoting the welfare and respectability of the profession; that you will demean yourself honourably in the practice thereof; that you will not put forth any nostrum or secret method of cure, nor engage in any other species of quackery; and, that you will not publish any matter or thing laudatory of yourself, or derogatory to the profession; and in the conferring of this degree, it is done with the express understanding that the Faculty reserve to themselves the right and privilege to revoke said degree whenever the promise here made shall be violated."

Medical College of Ohio.—Since the close of the last session the following changes have been made: Professor MUSSEY has vacated the chair of *Surgery*, and Professor JOHN BELL that of *Theory and Practice of Medicine*; Dr. H. W. Baxley has been transferred from the anatomical to the surgical chair, and Professor D. Drake has been elected to the chair of *Theory and Practice of Medicine*, and Dr. J. Cobb to that of *Anatomy*.

Miami Medical College of Cincinnati.—This is the title of a new school organized in Cincinnati. The faculty are as follows:—

R. D. Mussey, M. D., *Prof. of Descriptive and Operative Surgery*; J. P. Judkins, M. D., *Prof. of Surg. Anat. and Surg. Path.*; Chas. L. Avery, M. D., *Prof. of Anatomy*; John Davis, M. D., *Adjunct Prof. of Anatomy*; John F. White, M. D., *Prof. of Theory and Practice of Medicine*; George Mendenhall, M. D., *Prof. of Obstetrics and Diseases of Women and Children*; John A. Murphy, M. D., *Prof. of Materia Medica, Therapeutics, and Medical Jurisprudence*; C. G. Comigys, M. D., *Prof. of Inst. Med.*; John Locke, jr., M. D., *Lecturer on Chemistry*.

The regular course of lectures will commence on the 1st of November, and continue four months. A preliminary course will be given during October.

Boylston Medical Prize.—The Boylston prize, for 1852 (sixty dollars or a gold medal

of that value), has been awarded to Waldo S. Burnett, for the best dissertation on the "Original Researches with the Microscope illustrative of Anatomy, Physiology, or Pathology."

Fiske Fund Prize.—The Fiske Fund Prize of fifty dollars, for the best dissertation on the displacements of the uterus, their local and constitutional effects, and best mode of treatment, has been awarded to Dr. J. F. Peebles, of Petersburg, Va.

Transactions of the American Medical Association.—[We invite the attention of the members to the following circular issued by the Treasurer of the American Medical Association] :—

PHILADELPHIA, June 24, 1852.

DEAR SIR: The "Transactions of the American Medical Association," at its session of 1852, will, it is estimated, make a volume of nearly one thousand pages. Notwithstanding the increase in size, the Committee of Publication have not, however, considered it expedient to charge the members of the Association, and the several bodies represented therein, a greater price for the forthcoming volume than was paid by them for either of the four already published. They have resolved, therefore, to furnish to the members, and the institutions represented, one copy for three dollars, and two copies for five dollars; provided the said amounts are remitted previously to the first day of September next ensuing; after which period the price of the volume will be raised to five dollars.

The Committee of Publication would respectfully suggest the propriety of an early answer to this circular; the funds in the hands of the Treasurer are insufficient to defray the expense of printing the volume of Transactions, and until an additional sum of eleven hundred dollars is received, the committee will not be warranted in putting it to press.

Respectfully yours,
D. FRANCIS CONDIE,
Treasurer.

American Medical Association.—To the Medical Profession of the Southern and South-Western States :—

GENTLEMEN: At the last annual meeting

of the American Medical Association, I was continued as chairman of a committee to report at its next session on the prevalence of *idiopathic tetanus* (not endemic, as I was erroneously notified by my first appointment). Permit me, therefore, to solicit your assistance, to the extent of your information, either from personal experience or inquiry, embracing the immediate circuit of your professional supervision. Your attention to the following queries and answers *seriatim*, forwarded by mail to my address, on or before the 1st day of January, 1853, will not only serve the special object of the Association, but particularly oblige,

Very respectfully,

Your obedient servant,

A. LOPEZ.

MOBILE, ALABAMA, July 26, 1852.

1. Are there any physical causes, in or about your locality, productive of *idiopathic tetanus*?
2. Have changes by clearing of lands, change of culture, or any other circumstance, been the cause of such disease?
3. Has tetanus been of frequent occurrence, and if so, does it hold an analogous or independent origin of malarious diseases?
4. Does it follow the laws which govern climatic endemics, in sufficient number, and simultaneous prevalence to warrant the belief of its identical origin?
5. Have meteorological variations governed the production and character of the disease?
6. The average number of deaths from *idiopathic tetanus*?
7. Have adults or children been most liable to its attack?
8. What sex?
9. Proportion of whites to negroes?
10. Duration of disease previous to fatality?
11. Interval between cause and developments?
12. Does *trismus nascentium* ever observe an *idiopathic* or *symptomatic* character?
13. Are negro or white children most liable to it?
14. Your belief as to its origin?
15. Proportion of deaths to cures?
16. Have you found any form of treatment more successful than another, in either *idiopathic tetanus* or *trismus nascentium*?

Allopaths and Allopathy.—We have always maintained that a grosser insult and injustice could not be done to scientific physicians, than to term them allopaths, or a more inapplicable epithet be applied to them. The code of ethics of the American Medical Association declares that "no one can be considered as a regular practitioner, or a fit associate in consultation, whose practice is based on an *exclusive dogma*, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry."

An allopath, a homœopath, a hydropath, or the follower of any other exclusive dogma, cannot therefore be considered as a regular physician, or a fit associate in consultation. Such being the clear and explicit declaration made by the great medical congress of the profession, as to who are considered by them regular physicians, we trust that the profession will, on every occasion, promptly repudiate the term allopath as applicable to them. We must take this occasion to express our surprise that the editors of journals should allow the insertion of the advertisement of a drug establishment, which, while seeking the patronage of the profession, insults them with such an epithet. We doubt not that this has been done through mere ignorance on the part of the advertisers, but the editors of the journals in which this advertisement has appeared, can hardly be excused for permitting such an insult to be perpetrated.

We commend the following articles from our contemporaries, the *Western Lancet*, and the *New Hampshire Journal of Medicine* to the attention of our readers.

"Scientific Medicine.—We are almost daily excessively annoyed by hearing the term allopathy applied by physicians to what is termed sometimes the regular practice, and which should with more propriety be denominated scientific medicine. It ought to be known that this term is an invention of the enemy, for the purpose of placing scientific medicine in the position of a sect or section of medicine. By doing this, relative importance is given to what are claimed to be distinct systems in opposition to it. Now it is well known that the term allopathy is not expressive of any *acknowledged* medical creed or belief among scientific physicians. It is a designation placed in our mouths, no more applicable

to us than the term homœopathy. Scientific medicine knows no such narrow boundaries; it is broad and expanded enough to embrace all medical truth within its ample fold. No resort need be had, in the investigation of medical knowledge, to any such appellations. They are clap-traps for the purpose of elevating quackery and degrading science. These pretended systems, to which distinct names are given, are merely *excrescences* on the body medical, without any adherence to the opinions expressed in their titles. They should be treated as such, as malignant parasites, whose object is to imbibe vitality from the main trunk, while professions of a distinct existence are held out to the public. They are only of value to scientific medicine in their decay; when they may result in adding something to it by exhibiting, perchance, a few positive and negative facts in the field of experience, which, if valuable, will be absorbed by the profession. The garden of medicine may occasionally be enriched in this way by the decay of a noxious vegetation; which, during life, dared to raise its deformed specimens even among the choicest flowers, and claim a transient equality, by nominal rank as genera and species in the same kingdom of nature. We hope the term scientific medicine will be adopted, instead of one intended and calculated to degrade us; it is expressive of our creed, and, therefore, the most proper appellation; which is a sufficient reason for its use, to the exclusion of all others."—*Western Lancet*, July, 1852.

"The Practice of Allopathy."—We notice in several of our exchanges an advertisement, of a large drug house, with this caption, and take the liberty respectfully to call the attention of the editors to it. It seems apparent that to characterize the practice of medicine as *allopathy* is to place it on the same ground as homœopaths and other *thists*; and, for ourself, we are not willing thus to be classified. We recognize but two classes among *doctors*, namely, physicians, and followers of *systems*, as they are called. Claiming rank, then, with the former honourable body, we will not receive a title which shall confound us with the latter.—*N. Hampshire Journ. of Med.*, August, 1852.

Mortality.—The following table shows the mortality in our three principal Atlantic cities during the past four weeks, with their respective populations:—

Mortality.	Weeks ending				
	J'y 31.	A'g. 7.	A'g. 14.	A'g. 21.	Pop'n.
New York,	572	549	562	524	505,507
Boston,	92	122	83	84	136,751
Philadelphia,	227	250	238	206	409,054

OBITUARY RECORD.—It is with profound regret that we record the death of Dr. ISAAC PARRISH, which took place in this city on the 31st of July last, in the 42d year of his age. Dr. Parrish was an honourable and upright man, ever ready to uphold the character and to promote the interests of his profession, and zealous in support of every philanthropic project. By his death the profession and the public, have alike sustained a loss not easily to be repaired.

The following proceedings, held after his death, will show the high estimation in which he was held.

At a meeting of the Physicians, Officers, and Managers of the Wills' Hospital, on the morning of the 3d inst., the following preamble and resolutions, presented by Dr. S. Littell, were unanimously adopted:—

It having pleased the Most High to remove from us our lamented brother and associate, Dr. Isaac Parrish, duty alike to him, and to ourselves, requires at our hands some public expression of the feelings which an event so mournful is calculated to inspire. Therefore

Resolved, That we regard with deep emotion, the death of our late associate and friend, for the last eighteen years one of the Surgeons of this Institution.

Resolved, That while his kindness of heart, gentleness of manner, and elevated moral qualities, endeared him to all who were thus associated with him, his eminent professional skill, and exemplary discharge of duty, contributed greatly to promote the usefulness of the Institution, and will cause him long to be held in affectionate and grateful remembrance.

Resolved, That in the early departure of this excellent citizen, we deplore the loss of one, who was at once a useful member of society, an ornament to his profession, and a never-failing friend to the poor and the afflicted.

Resolved, That the Secretary be instructed to inclose to the family of Dr. Parrish, a copy of these resolutions, with the assurance of the profound sympathy of this meet-

ing, in their double and overwhelming bereavement.

ISAAC ELLIOTT, *Chairman.*

C. ELLIS, *Secretary.*

At a meeting of the College of Physicians, held August 11, 1852, the following resolutions, prepared by a committee appointed at a previous meeting, were unanimously adopted:—

Resolved, That the College has received with deep regret the announcement of the demise of its late Fellow, Dr. Isaac Parrish, who, after a few days' illness, died on the 30th ultimo.

Resolved, That by this unlooked for event, the College has lost one of its most active and useful members, one whose zeal for its welfare, and whose professional attainments, together with his urbanity and moral worth, had characterized him as a most valuable colleague, and secured to him the respect and esteem of the Fellows.

Resolved, That the College, sincerely participating with the family of its deceased Fellow in the sorrow occasioned by their great and sudden bereavement, request the Secretary to transmit to them the expression of its unfeigned sympathy.

Died in Philadelphia, on the 4th of August, 1852, of consumption, George W. Patterson, M. D., Resident Physician of the Northern Dispensary.

At a special meeting of the Northern Medical Association, held August 5, 1852, the following preamble and resolutions were adopted:—

Whereas, an All-wise Providence has, in his dispensations, seen fit to remove from earth, one of the members of our Medical Association—

Resolved, That in the death of George W. Patterson, M. D., the members of the Northern Medical Association painfully recognize the loss of a talented and valuable brother, and feel that the community at large has been deprived of a most useful and benevolent citizen.

Resolved, That while we bow with proper submission to our great affliction, we will remember and profit by the irreproachable example of upright deportment and sentiment always evinced by the lamented deceased.

Resolved, That while we sincerely mourn

this great public and private bereavement, our grief is tempered by the full assurance that our departed friend has entered on a happy immortality.

Resolved, That Dr. Joseph R. Bryan be requested to prepare a Biographical Notice of our deceased lamented member, to be read before the Association.

Resolved, That as an evidence of our sympathy with their sorrow, a copy of these, our sentiments, be transmitted to the family of our late associate.

Resolved, That on Saturday next, at 3 o'clock, P. M., the members of this Association will assemble at the usual place of meeting, in order to attend the funeral of our deceased fellow-member.

Resolved, That a copy of these proceedings be furnished for publication in the *Medical Examiner and News*, and also in one or more of the daily papers.

BENJ. S. JANNEY,
President.

J. HENRY SMALTZ, Secretary.

FOREIGN INTELLIGENCE.

Death from Chloroform.—A death from the effects of chloroform, administered with a view to its anæsthetic action, is reported from the Stepney Union-House. The unfortunate man was a baker. The dose given of the chloroform was small, half a drachm being employed first, and, that failing to produce any action, another half drachm was used, and the fatal result occurred. The surgeon who administered it, said he had examined the man, and found nothing to prohibit its use. He attributed the death to a peculiar idiosyncrasy, rendering the man very susceptible of the action of chloroform; that is to say, he did not know in what way to account for it. The manner in which the chloroform was administered is not mentioned.—*Prov. Med. and Surg. Journ.*, May 28, 1851.

Operation for Harelip the day after birth.—M. GUERSANT, surgeon to the hospital for sick children in Paris, has lately operated, with successful results, upon a child, one day old, affected with harelip, and a fissure of both hard and soft palate. The operation was performed in the usual way, except towards the septum nasi, where M. Guersant placed a strong *serre-fine* (diminutive spring forceps), the rest of the opening

being brought together with the common pins and twisted suture. Fifteen days after the operation, the parts were firmly cicatrized, and the child quite well, the fissured hard and soft palates having of course not been interfered with.—*Lancet*, July 24, 1852.

Lupus cured by large doses of Cod-liver Oil.—*L'Union Médicale* mentions a case of lupus related in the *Annales de la Société de Médecine de Gand*, in which the ulcerations cicatrized under the influence, or during the administration, of cod-liver oil. The patient was a young man of twenty-three years, residing in the country, and was admitted into the hospital of Ghent on the 6th of December, 1850. The disease had manifested itself in various parts of the face and chest, and was of old standing. After purging and rest, half a pound of oil was given in the day, two equal halves being taken morning and evening; the daily dose was gradually carried to three pounds, with occasional interruptions, when the appetite failed, or diarrhoea came on. The patient was in the meantime well fed, had wine and beer, and the ulcerated spots were successively touched with tincture of iodine, lemon-juice, and nitrate of silver. In the space of about seven months the cure was complete, all the lupoid ulcerations, to the number of three or four, were completely cicatrized, and the patient had purchased this result by swallowing, during that period, 265 pounds of cod-liver oil!

Chloroform Ointment for Hemicrania and Neuralgia.—M. CAZENAVE, of Bordeaux, recommends the above ointment, which is prepared as follows: Pure chloroform, three drachms; cyanide of potassium, two drachms and a half; axunge, two ounces; add a sufficient quantity of white wax to make an ointment of the usual consistence.—*Lancet*, July 31, 1852.

Ague treated by a Terebinthinate Liniment along the Spine.—M. ARAN mentions, in the *Bulletin de Thérapentique*, that he has succeeded in staying ague fits by the use of the following liniment: Essential oil of turpentine, three ounces and a half; chloroform, about one drachm. The patient was a young man, with whom quinine had failed, and the above liniment was used about two hours before the fit. The latter appeared

at the usual hour, but was somewhat shorter than the preceding; the second was kept off for four hours; the third failed to appear altogether, and the patient was soon quite well, experiencing only for a few days a certain amount of discomfort at the accustomed hour of the fits. The liniment had several years ago been introduced by M. Bellencontre, laudanum being, however, used instead of the chloroform employed by M. Aran.—*Ibid.*

Yeast in the Treatment of Boils.—Mr. Mosse, in a communication in the *Lancet* (July 31, 1852), states that, "During a period of eight years and more, being in practice in the West of England, where these annoyances rather raged, and were known by the name of 'pinswills,' I was induced to try the efficacy of common yeast (having failed to give relief in general modes of treatment), in doses of a tablespoonful with some water three times a day, for an adult, and smaller doses for children.

"I have now practised in this town nearly six years, and have had frequent opportunities also here of witnessing the good effect of yeast in these troublesome affections, easily consummating a rapid and complete cure without further recurrence, and by a most simple remedy, within reach of all."

Extraordinary Fecundity.—A Belgian paper states that a woman, thirty-three years of age, is now living at Liege, who affords an astonishing example of fecundity. She was lately confined of triplets, who are respectively her twenty-second, twenty-third, and twenty fourth children. She has thus had, during nine years of married life, twenty-four children, all in good health, and of the female sex.—*Ibid.*

Changes effected in Medical Education in France, both as regards professors and pupils.—There have been of late promulgated in Paris a series of decrees bearing upon the medical profession, which have worked a considerable and very sad change in the former state of things. It is in the first instance to be noted, that the professors are no longer appointed by "concours," or public competition, but the chairs are now given or withdrawn at the pleasure of the President. This arbitrary course applies to the members of the superior council of public instruction, to inspectors-general, rectors

of academies (a kind of branch universities in the provinces, the government recognizing but one university, which has its seat at Paris), the professors of the four faculties, of the College of France (three professors of this college, Michelet, Quinet, and Mischieviz, have already been dismissed), of the museum of natural history, and of the school of pharmacy. The superior council of public instruction has been also greatly modified, M. Orfila being, amongst others, dismissed; and M. Bérard, late Dean of the Faculty of Medicine, appointed Inspector-general of Medical Education. M. P. Dubois replaces M. Bérard as Dean.

Thus is the concours dead, as far as professorships are concerned; hospital physicians and surgeons (excepting the professors of clinical medicine and surgery who belong to the faculty) are, however, still nominated after a protracted competition. How long this illiberal course will be pursued, it is difficult to say. So much for the teachers; as to the pupils, a no less destructive decree has been put forth as regards their preliminary education. Hitherto, a young man before taking out his first inscription (or lecture) at the faculty, was obliged to produce his diploma of bachelor of letters (pretty similar to our bachelor of arts), and his first year was then devoted to the study of the natural and physical sciences, at the expiration of which time he was expected to pass an examination to obtain the degree of bachelor of science. Thus prepared, the young man fairly launched into medical studies, and it may be supposed that with a moderate share of intelligence, an examination every year, and a final one at the expiration of four, he would be likely to be worthy of his doctor's diploma. Even students in pharmacy could not commence their studies at the school of that name, except they produced a diploma of bachelor of letters. A late decree has upset all this; the study of letters is reserved for the faculty of letters and of law; the faculty of medicine and of sciences no longer require the polish of *humanities*; the degree of bachelor of science will henceforth be sufficient. The French, Latin, and Greek *grammar*, with a little logic, is all that is required of the new race of doctors, as far as philology, ancient and modern literature, are concerned. Thus will the licentiates of our Apothecaries' Hall be far better educated, in a literary point of view, than

the M.D.'s of the French Faculty, (and of several others.)

Another decree has worked a complete change in the army medical department; here, however, a certain amount of favour and partiality has been shown to the profession, as the number of higher grades is increased, the lowest altogether done away with, and the pay of all materially augmented. There is to be one central school at Paris, whence the young men will be distributed into the military hospitals and regiments, after passing a strict examination, and having obtained the degree of doctor of medicine in a faculty. Formerly, the medical officers of the French army, with a few exceptions, were called *surgeons*; they are now called *médecins*, a term which seems more applicable, as both surgical and medical affections are treated by military practitioners. A *médecin* is in France what we call a *medical man*, when no distinction is made as to physician, surgeon, or general practitioner. When medical affairs have in this country come a little nearer to stability and satisfactory settlement, it would be very convenient to adopt such a term as *medicus*, for instance, to designate any professional man, his branch of practice being an object, if need be, of a further consideration. A *medicus*, though now sounding strange, would soon become as much part and parcel of the vernacular as *omnibus*.—*Lancet*, May 1, 1852.

Nitric Acid in Rain-Water.—M. PARAL has lately found, after very careful and well-conducted experiments, which stretched over more than six months, that the rain water collected at Paris contains appreciable quantities of nitric acid. This discovery has been confirmed by a committee appointed by the Academy of Sciences, and composed of Messrs. Dumas, Boussingault, Gasparin, Regnault, and Arago. It is supposed that the presence of nitric acid in rain-water will explain certain hitherto ill-understood telluric phenomena, and lead to some practical applications. It is due to Dr. Benze Jones, of St. George's Hospital, to say, that he had already pointed out the fact, in the *Philosophical Transactions* of 1851, as to the rain-water collected at Kingston (Surrey), Melburg (Dorset), the neighbourhood of Cork, and in London. Dr. Benze Jones was herein in opposition with Liebig, who has denied that rain-water contained appreciable quantities of nitric acid.—*Ibid*.

Cholera.—This disease is said to have again broken out in a most virulent form on the frontiers of the kingdom of Warsaw, and that between forty and fifty cases have occurred within the space of two days in the city of Warsaw. It is further stated, that medical arrangements have been made in all parts of the country, with a view of being prepared for the calamity, should the epidemic unhappily again become general throughout the kingdom. The cholera had broken out at Flechon, in the Grand Duchy of Posen, and in ten days it had carried off seventeen persons out of twenty-two who were attacked. 1800 have died of cholera, out of a population of 12,000.—Accounts from the town of Kalisch, in Russian Poland, which, according to the last census, contained about 670 houses, and 11,000 inhabitants, and is considered one of the principal places of Russian Poland in point of mercantile opulence and trade, represent the ravages of the cholera, which has been prevailing there for now several weeks, as very fearful.

The cholera has also made its appearance at Dantzic. Of every five persons attacked, it is said that four have died.

Progress of Epizootics, &c.—The disease among the potatoes has commenced throughout Ireland, and it would seem that the destruction of that useful and almost universal esculent among our Irish brethren, will be more general and more severe than it was even in 1845. Accounts pour in from all quarters to that effect, and it is much to be feared that it will be again the prelude of a fearful famine, and consequent fever. The potato blight is also spreading in England; it was discovered in Cambridgeshire and in the neighbourhood of Oxford, immediately after the great thunderstorm, the leaves and stems appearing withered and burnt. It has also re-appeared in some parts of the Lothians. It was first seen about the 20th, and did not make much progress till the 26th—a time when thunderstorms of the most fearful and destructive character were very rife. In some places the disease is at once and openly attributed to the effects of electricity. In the vine districts of France and Italy, the vineyards are suffering from the disease which has affected and destroyed the vines for several years past, and the beans in this country are also more or less diseased. The French vineyards, it is said,

will not yield one-third their usual crop. The malady by which the vines of France, Italy, Madeira, Sicily, and Lisbon, are afflicted is called the "mangra," or "oidium," and it appears, at first, like small dust on the green berry, causing the fruit to burst, and ultimately to become putrid. It has made but little progress in Burgundy, but in the south its ravages are very general, very few vineyards being spared. In Madeira, and in the neighbourhood of Lisbon, the grape crop has entirely failed. The Royal Agricultural Assurance Society have had to pay upwards of 200,000*l.* during the past year, in consequence of the fatality attending the epizootic among cattle.

By intelligence from Greece, we learn that an unknown disease has attacked the currant plant, which blackens and rots the grape in one night. It is calculated that not a fourth of the whole product will be saved. It is said that the currants of the Ionian Islands have also been attacked by this extraordinary malady.—*Medical Times and Gazette*, August 7, 1852.

A Practical Point in Midwifery.—Mr. DENDY drew the attention of the Medical Society of London to a simple point in midwifery, yet one of practical importance in reference to the relief of lingering labour. He did not allude to cases resulting from unfavourable position, pelvic incapacity, rigidity, or deficient uterine action, but to a state in which the pelvis was capacious, and the soft parts prepared, and the uterine effort vigorous, and yet parturition was at once completely checked. In the cases to which he alluded, there is not mere rigidity of membranes, which may be at once relieved; but the head completely blocks the pelvic outlet, like a keystone, while the liquor amnii is retained above. The pain is severe, often agonizing, but is situated more in the epigastric region; it is often attended by retching and dyspnoea, but without the slightest propulsive effort. The membranes are stretched tightly over the vertex, the vagina being usually heated and dry. The common modes of treating irregular pains by opiates, etc., are useless. Even if the membrane be cut across over the vertex, it is of no avail; and the head cannot be raised, so as to let down the waters, which, by their excess, distend, and, as it were, paralyze the uterine action. Such was the condition of a lady in Brixton-road, to whom he was

called a few days ago. The pain was agonizing, more resembling that of acute peritonitis than labour, with scarcely any remission. The introduction of a long probe at the side of the head was immediately adopted, for the purpose of perforating the membranes above the head; the dribbling of the water speedily relieved the uterus of its distension, and the labour was in a few minutes concluded. This case may perhaps seem insignificant, but its management may often prevent much needless and wearing pain.—*Medical Times and Gazette*, Aug. 7, 1852.

Humanity of the Medical Profession.—Amongst the leading characteristics of the medical character, humanity is one of the most prominent. At the call of the lowest and meanest, at all hours and in all seasons, the medical practitioner never fails to attend to the cry of the suffering and the diseased; and this, in too many instances, without the slightest expectation of fee or reward. The services thus rendered to humanity are beyond all calculation. The charitable exertions of every other profession and calling, "pale" before those of the humane practitioner of medicine.—*Lancet*, Aug. 14, 1852.

Medical Profession in Prussia.—A statistical account of the medical profession in Prussia has just been published at Berlin. According to that document, there are at present 287 district physicians, 3266 practitioners, 962 surgeons of the first class, and 973 of the second class—sum total, 5488. These figures being put by the side of the amount of population, which was at the last census 16,216,912 souls, will give one physician or surgeon for about 3000 inhabitants. The number of veterinary surgeons is 828, and the apothecaries amount to 1471.

University of Edinburgh.—The medical faculty state that from 1796 to 1831 the proportion of rejected candidates for the doctorate had increased from one in fifteen to one in five.

OBITUARY RECORD.—Died suddenly, on the 17th of July, at his country house, Woodlands Manor, Kent, in the seventy-fifth year of his age, J. P. VINCENT, Esq., and late Senior-Surgeon to St. Bartholomew's Hospital.